than one signature is required, see below.

PTO/SB/22 (06-09)

Approved for use through 07/31/2009. OMB 0651-0031

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) 20692/0205418-US0 FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Filed September 29, 2006 **Application Number** 10/599,526-Conf. #1324 HEAT-SHRINKABLE LAYERED POLYOLEFIN FILM, HEAT-SHRINKABLE LABEL, AND CONTAINER For WITH THE LABEL ATTACHED THERETO 1794 Examiner L. D. Ferguson Art Unit This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee Fee \$65 One month (37 CFR 1.17(a)(1)) \$130 490.00 \$245 Two months (37 CFR 1.17(a)(2)) \$490 \$555 Three months (37 CFR 1.17(a)(3)) \$1110 Four months (37 CFR 1.17(a)(4)) \$1730 \$865 Five months (37 CFR 1.17(a)(5)) \$2350 \$1175 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 December 22, 2009 Date (212) 527-7700 Dianna Goldenson Telephone Number Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more

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